COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL020018 US

As a below named inventor, I hereby declare that:					
My residence, post office address and citizenship are as stated next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "Scanning display" the specification of which (check only one item below):					
is attached hereto.					
☐ was filed as United States a	pplication				
Serial No ————					
on					
and was amended					
on .					
X was filed as PCT internation	al application				
_	•				
	2222				
on23 December	2002				
and was amended under PCT					
on (if applicable).					
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	n, including the		
		rial to the examination of this application	an in accordance with		
Title 37, Code of Federal Regul		rial to the examination of this application	on in accordance with		
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:					
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	02075200.2	17 January 2002	YES		
<u> </u>		LIS DEPARTMENT OF COMMERC	E -Patent and Trademarks (

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number

PHNL020018 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245

Direct Telephone Calls to: (name and telephone number) (914)332-0222

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	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME Johannes	Nicolaas
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	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	VAN TONGEREN	Henricus	Franciscus Johannus Jacobus
204	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
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	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands SECOND GIVEN NAME
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	Theodorus Hubertus
	INVENTOR	LIEDENBAUM	Coen	Fransiscus
005	DECIDENCE :	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
205	RESIDENCE & CITIZENSHIP	CITY Eindhoven	The Netherlands	The Netherlands
				STATE & ZIP CODE/COUNTRY
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	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	SECOND GIVEN NAME
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200	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
206	CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
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	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 202 DATE DATE 08 August 2003 SIGNATURE OF INVENTOR 206 SIGNATURE OF INVENTOR 204 SIGNATURE OF INVENTOR 205 DATE DATE DATE

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (includes Reference to PCT International Applications) PHNL020018 US								
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1-	υ	FULL NAME OF INVENTOR	FAMILY NAME HUIBERTS		FIRST GIVEN NAME		SECOND GIVEN NAME Nicolaas	
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d	-00	FULL NAME OF INVENTOR	FAMILY NAME SEMPEL	de de la company	FIRST GIVEN NAME Adrianus		SECOND GIVEN NAME	
	202	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COU The Netherlands	NTRY	COUNTRY OF CITIZENSHIP The Netherlands	
		POST OFFICE ADDRESS	POST OFFICE AD Prof. Hoistlaan		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTR The Netherlands	(Y
2	ש	FULL NAME OF INVENTOR	FAMILY NAME SNIJDER		FIRST GIVEN NAME Pieter		SECOND GIVEN NAME Jacob	
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<u>.</u> (טז	FULL NAME OF INVENTOR	FAMILY NAME VAN TONGERE	EN	FIRST GIVEN NAME Henricus		SECOND GIVEN NAME Franciscus Johannus Jac	obus
	204	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COU The Netherlands	NTRY	COUNTRY OF CITIZENSHIP The Netherlands	
		POST OFFICE ADDRESS	POST OFFICE AD Prof. Holstlaan		CITY 5656 AA Eindhoven		STATE & ZIP CODE/COUNTR The Netherlands	ťΥ
-4	10	FULL NAME OF INVENTOR	FAMILY NAME LIEDENBAUM		FIRST GIVEN NAME Coen		SECOND GIVEN NAME Theodorus Hubertus Fransiscus	
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5 -6	50	FULL NAME OF INVENTOR	FAMILY NAME VAN DE WALLI	E	FIRST GIVEN NAME Gerjan		SECOND GIVEN NAME Franciscus Arthur	
	206	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COU The Netherlands	INTRYLX	COUNTRY OF CITIZENSHIP The Netherlands	
		POST OFFICE ADDRESS	POST OFFICE AL Prof. Holstlaan		CITY 5656 AA Eindhoven	•	STATE & ZIP CODE/COUNTR The Netherlands	ťΥ
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	belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.							
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SIGNATURE OF INVENTOR 206

11 August 2003

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DATE 11 August 2003

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SIGNATURE OF INVENTOR 205

DATE

DATE

SIGNATURE OF INVENTOR 204

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (includes Reference to PCT International Applications) PHNL020018 US POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222 SECOND GIVEN NAME **FULL NAME OF FAMILY NAME** FIRST GIVEN NAME **INVENTOR HUIBERTS Johannes Nicolaas** COUNTRY OF CITIZENSHIP 201 **RESIDENCE &** CITY STATE OF FOREIGN COUNTRY The Netherlands The Netherlands CITIZENSHIP Eindhoven POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY 5656 AA Eindhoven The Netherlands **ADDRESS** Prof. Holstlaan 6 SECOND GIVEN NAME FIRST GIVEN NAME **FULL NAME OF FAMILY NAME INVENTOR** SEMPEL **Adrianus RESIDENCE &** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 202 CITY Eindhoven The Netherlands The Netherlands CITIZENSHIP STATE & ZIP CODE/COUNTRY POST OFFICE POST OFFICE ADDRESS **ADDRESS** Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF **FAMILY NAME** INVENTOR SNIJDER Pieter Jacob COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY 203 **RESIDENCE &** CITY **CITIZENSHIP** The Netherlands The Netherlands Eindhoven STATE & ZIP CODE/COUNTRY POST OFFICE POST OFFICE ADDRESS 5656 AA Eindhoven The Netherlands **ADDRESS** Prof. Holstlaan 6 FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF **FAMILY NAME** INVENTOR **VAN TONGEREN** Henricus Franciscus Johannus Jacobus STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 204 **RESIDENCE &** CITY CITIZENSHIP Eindhoven The Netherlands The Netherlands STATE & ZIP CODE/COUNTRY POST OFFICE POST OFFICE ADDRESS **ADDRESS** 5656 AA Eindhoven The Netherlands Prof. Holstlaan 6 SECOND GIVEN NAME FULL NAME OF FAMILY NAME FIRST GIVEN NAME **LIEDENBAUM Theodorus Hubertus** INVENTOR Coen Fransiscus 205 **RESIDENCE &** CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP

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INVENTOR

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Prof. Hoistlaan 6

Prof. Holstlaan 6

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Eindhoven

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
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U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

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SECOND GIVEN NAME

Franciscus Arthur

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STATE & ZIP CODE/COUNTRY

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Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

FULL NA		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTO	R	HUIBERTS	Johannes	Nicolaas
201 RESIDEN	ICE &	CITY	STATE OF FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENS	SHIP	Eindhoven	The Netherlands	The Netherlands
POST OF	FICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
ADDRES	S	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
FULL NA	ME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTO)R	SEMPEL	Adrianus	
202 RESIDEN	ICE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENS	SHIP	Eindhoven	The Netherlands	The Netherlands
POST OF	FICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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FULL NAI	ME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTO	R	SNIJDER	Pieter	Jacob
203 RESIDEN	ICE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENS	SHIP	Eindhoven	The Netherlands	The Netherlands
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POST OF		POST OFFICE ADDRESS	CITY	The Netherlands
	ADDRESS Prof. Holstlaan 6 5656 AA Eindhoven			
FULL NAI		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME Franciscus Johannus Jacobus
INVENTO		VAN TONGEREN	Henricus	
204 RESIDEN		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP The Netherlands
CITIZENS		Eindhoven	The Netherlands	STATE & ZIP CODE/COUNTRY
POST OF		POST OFFICE ADDRESS	CITY	The Netherlands
ADDRES		Prof. Holstlaan 6	5656 AA Eindhoven	SECOND GIVEN NAME
FULL NAI		FAMILY NAME	FIRST GIVEN NAME	
INVENTO	K	LIEDENBAUM	Coen	Theodorus Hubertus
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205 RESIDEN		CITY	STATE OR FOREIGN COUNTRY	The Netherlands
CITIZENS	SHIP	Eindhoven	The Netherlands	***************************************
POST OF	FICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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FULL NAI	ME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
INVENTO)R	VAN DE WALLE	Gerjan	Franciscus Arthur
206 RESIDEN	ICE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENS	SHIP	Eindhoven	The Netherlands	The Netherlands
POST OF	FICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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1				

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DATE	DATE 18 August 2003	DATE 18 August 2003

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PTO/SB/80 (12-03)

Approved for use through 11/30/2005. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:						
Practitioners associated with the Customer Nun OR	nber:	24737				
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):						
Name			Registratio	n Number		
		<u> </u>				
			-			
as attorney(s) or agent(s) to represent the undersigned any and all patent applications assigned only to the unattached to this form in accordance with 37 CFR 3.73(t	Manage boroisman	d States Patent and ling to the USPTO	d Trademark C assignment rec	office (USPTO) in connection with cords or assignment documents		
Assignee Name and Address:						
Koninklijke Philips Electronics N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands						
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney isto be filed.						
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee						
Name Matthieu van Kaam Signature			Date			
THE	<u>~</u>			Amilla 2004		
Authorized Representati	ve		Telephone	(914) 333–9600		

This collection of information is required by 37 (374 1.31 and 1.33). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND To: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.